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## APPLICANTS

Darrell L. Metz, Batesville, IN;

John P. Biondo, Aurora, IN;

\*\* CONTINUING DATA \*\*\*\* *LLC*

This application is a CON of 09/874,486 06/05/2001 PAT 6,585,206  
 which claims benefit of 60/209,379 06/05/2000

\*\* FOREIGN APPLICATIONS \*\*\*\* *R**none*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/09/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<i>Met after Allowance</i>	DRAWING 5	20	3
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>			

## ADDRESS

Intellectual Property Group  
 Bose McKinney & Evans LLP  
 2700 First Indiana Plaza  
 135 North Pennsylvania Street  
 Indianapolis, IN  
 46204

## TITLE

Medical accessory support

- All Fees
- 1.16 Fees ( Filing )
- 1.17 Fees ( Processing Ext. of time )

FILING FEE FEES: Authority has been given in Paper  
 No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT